

## EXPLOSIVE HAZARDS CLEARANCE REPORT

For use of this form, see FM 3-34.210; the proponent agency is TRADOC.

### SECTION I - GENERAL INFORMATION

1. EXPLOSIVE HAZARDS AREA IDENTIFICATION		2. TASK ORDER NUMBER	
3. APPROVING AUTHORITY		4. UNIT	
5. OFFICER IN CHARGE		6. REPORTED BY	
7. MAP NAME		8. MAP SERIES NUMBER	
9. MAP SHEET NUMBER	10. MAP SCALE		11. MAP EDITION
12. START DATE (YYYYMMDD)		13. COMPLETION DATE (YYYYMMDD)	
14. AREA TO BE CLEARED (m2)	15. REQUIRED DEPTH (cm)		16. TOTAL WORK HOURS

### SECTION II - CLEARANCE INFORMATION *(Check more than one, if appropriate.)*

17. TYPE OF TASK		18. TECHNOLOGIES/METHODS USED	
<input type="checkbox"/> CLEARING	<input type="checkbox"/> MANUAL	<input type="checkbox"/> ROLLER	<input type="checkbox"/> EXPLOSIVE LINE CHARGE
<input type="checkbox"/> BREACHING	<input type="checkbox"/> FLAIL	<input type="checkbox"/> MINIFLAIL	<input type="checkbox"/> DOZER
	<input type="checkbox"/> DOGS	<input type="checkbox"/> OTHER	
19. TERRAIN		20a. ACCIDENT/INCIDENT DURING CLEARING <i>(Attach additional sheets, if needed.)</i>	
<input type="checkbox"/> RURAL	<input type="checkbox"/> URBAN	<input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> AGRICULTURAL	b. ACCIDENT IDENTIFICATION	
<input type="checkbox"/> WOODED	<input type="checkbox"/> OPEN	c. DATE (YYYYMMDD)	
<input type="checkbox"/> SWAMP		d. DESCRIPTION	
21. UNCLEARED AREA LEFT		22. UNCLEARED AREA MARKING	
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> LOCAL SIGNS	<input type="checkbox"/> OFFICIAL SIGNS
		<input type="checkbox"/> FENCED	<input type="checkbox"/> NONE
23. UNCLEARED AREA DESCRIPTION			

### SECTION III - UNCLEARED AREA

24. TURNING POINT NUMBER	25. 10-FIGURE GRID COORDINATE
TP 1	
TP 2	
TP 3	
TP 4	
TP 5	
TP 6	
TP 7	
TP 8	
TP 9	
TP 10	
TP 11	
TP 12	
ADDITIONAL INFORMATION	

SECTION IV - PROOFING INFORMATION <i>(Check more than one, if appropriate.)</i>			
<b>26. TYPE OF TASK</b>  <input type="checkbox"/> PROOFING (Primary) <input type="checkbox"/> PROOFING (Secondary)	<b>27. TECHNOLOGIES/METHODS USED</b>  <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> MANUAL  <input type="checkbox"/> FLAIL  <input type="checkbox"/> DOGS           </div> <div> <input type="checkbox"/> ROLLER  <input type="checkbox"/> MINIFLAIL  <input type="checkbox"/> OTHER           </div> <div> <input type="checkbox"/> EXPLOSIVE LINE CHARGE  <input type="checkbox"/> DOZER           </div> </div>		
<b>28. PROOFING DONE BY</b>  <input type="checkbox"/> SAME UNIT <input type="checkbox"/> CONTRACTOR <i>(Name)</i> _____  <input type="checkbox"/> OTHER <i>(Describe)</i> _____	<b>29a. ACCIDENT/INCIDENT DURING PROOFING <i>(Attach additional sheets, if needed.)</i></b> <input type="checkbox"/> YES <input type="checkbox"/> NO <div style="display: flex; border-top: 1px solid black; border-bottom: 1px solid black;"> <div style="width: 60%; border-right: 1px solid black; padding: 2px 5px;">b. ACCIDENT IDENTIFICATION</div> <div style="width: 40%; padding: 2px 5px;">c. DATE (YYYYMMDD)</div> </div> <div style="border-top: 1px solid black; border-bottom: 1px solid black; padding: 2px 5px;">d. DESCRIPTION</div>		
SECTION V - CLEARED AREA			
<b>30. TURNING POINT NUMBER</b>	<b>31. GRID COORDINATE</b>		
TP 1			
TP 2			
TP 3			
TP 4			
TP 5			
TP 6			
TP 7			
TP 8			
TP 9			
TP 10			
TP 11			
TP 12			
TP 13			
TP 14			
TP 15			
TP 16			
TP 17			
TP 18			
TP 19			
TP 20			
<b>32. AREA CLEARED (m<sup>2</sup>)</b>	<b>33. DEPTH CLEARED (cm)</b>		
<b>34. REFERENCE POINT DESCRIPTION</b>			
<b>35. PERIMETER FENCE DESCRIPTION</b>			
<b>36. OFFICER IN CHARGE COMMENTS</b>			

[illegible]

## DECLARATION BY REPRESENTATIVE OF THE CLEARANCE ORGANIZATION

I declare that the area described in this document has been cleared according to the International Mine Action Standards and the United Nations Mine Action Centre Technical Guidelines and that, to the best of my knowledge and belief, is free of landmines and unexploded explosive ordnance.

42. NAME	43. POSITION	44. DATE (YYYYMMDD)	45. SIGNATURE
46. DATA ENTERED BY	47. TOTAL NUMBER OF PAGES	48. DATE (YYYYMMDD)	49. SIGNATURE

This declaration of clearance is accepted.

I have walked the area described in this report and accept it as clear of landmines and unexploded explosive ordnance.

50. NAME	51. ORGANIZATION	52. DATE (MM/DD/YY)	53. SIGNATURE
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50. NAME	51. ORGANIZATION	52. DATE (YYYYMMDD)	53. SIGNATURE
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54. ORIGINAL TO	55. COPY TO
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55. COPY TO	56. COPY TO
56. COPY TO	57. COPY TO

58a NAME	b RANK	59a NAME	b RANK
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50a. NAME	b. RANK	50a. NAME	b. RANK
60a. NAME	b. RANK	61a. NAME	b. RANK

A. REQUIRED: An explanatory sketch of the area indicating the type and location of cleared and marked areas, including reference points

B. IF APPROPRIATE: Map of the area.

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# ATTACHMENT A - EXPLANATORY SKETCH

MAGNETIC  
NORTH

1 square (5 mm) =            meters

## LEGEND

- RP - reference point
- BM - benchmark
- SP - start point
- TP - turning point
- HA - hazard area
- SA - safe area
- SL - safe lane
- BL - boundary lane
- EL - exploratory lane
- AL - access lane
- MSR - main supply route
- - AP mine
- - AT mine
- - EH (type unknown)

DRAWN BY

DATE (YYYYMMDD)

CHECKED BY

DATE (YYYYMMDD)